



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8874

|   |   |                               |   |                                       |
|---|---|-------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/800,376  | <b>FILING OR 371(c) DATE</b><br>03/12/2004<br><b>RULE</b>   | <b>CLASS</b><br>707           | <b>GROUP ART UNIT</b><br>2161   | <b>ATTORNEY DOCKET NO.</b><br>SLX-001 |
| <b>APPLICANTS</b><br>Dinendra V. Joshi, Santa Clara, CA;<br>Padmaja P. Dasari, Santa Clara, CA;<br>Ashutosh R. Patil, Santa Clara, CA;  |   |                               |   |                                       |
| <b>** CONTINUING DATA *****</b><br>N/A  |   |                               |   |                                       |
| <b>** FOREIGN APPLICATIONS *****</b><br>N/A   |   |                               |   |                                       |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 06/04/2004   |   |                               |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <u>WLC</u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>19             |
|   |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>5        |
| <b>ADDRESS</b><br>William L. Botjer<br>PO Box 478<br>Center Moriches, NY11934   |   |                               |   |                                       |
| <b>TITLE</b><br>System and method for seamless access to multiple data sources  |   |                               |   |                                       |
| <b>FILING FEE RECEIVED</b><br>536   | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |